

09/503638

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MA	70591	2/24
O.I.P.E. CLASSIFIER		76	3600
FORMALITY REVIEW	DS	65085	4 20 17
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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